2016	ion 1	Section 2 (add section 1 & 2 for family coverage)				Section 3					
Retiree Monthly Rates	Retiree under 65	Retiree 65 & over	Spouse under 65	Spouse under 65 and 1 or more children	One or more eligible child/ no spouse	Spouse 65 & over	Spouse 65 & over & 1 or more children	Surviving Spouse or one dependent under 65	Surviving Spouse 65 & over	Two or more surviving dependents under 65	Surviving Spouse 65 or over & one or more children
Minnesota Advantage Health Plan - BlueCross BlueShield Coordinated Plan	564.22	 295.00	1094.98	1094.98	1094.98	 295.00	1094.98	564.22 —	 295.00	1659.20 —	 1389.98
Minnesota Advantage Health Plan - HealthPartners HealthPartners Freedom Plan	564.22	 272.10	1094.98 —	1094.98	1094.98 —	 272.10	1094.98	564.22 —	 272.10	1659.20 —	 1367.08
Minnesota Advantage Health Plan - PreferredOne UCare for Seniors	564.22	 284.00	1094.98	1094.98	1094.98 —	 284.00	1094.98	564.22 —	 284.00	1659.20 —	— 1378.98

2016 Retiree Dental Rates	Retiree/Former Employee Only	Family	Surviving Spouse Only	
HealthPartners State of Minnesota Dental Plan	29.70	87.84	29.70	
State Dental Plan (Delta Dental)	29.70	87.84	29.70	

2016 Life Insurance Rates					
Basic Life	\$10.36				
Managerial Life (MLMA 1 1/2 x)	\$38.76				
Managerial Life (MLMB 2 x)	\$56.49				
Child Life	\$ 0.86				